JOB APPLICATION

the Scottish Pig 16255 Cooks Mill Rd, Lanexa, Virginia 23089 804 363 2382

The Scottish Pig is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below: **Applicant Information Applicant Name:** Address: City, State and Zip Code: Telephone Number: Email Address: Date of Application: **Employment Position** Position(s) applying for: Order Taker / Line Cook / Cleaner (part time) How did you hear about this position? What days are you available for work? On what date can you start working if you are hired? Do you have reliable transportation to and from work? **Personal Information** Are you 18 years of age or older? Yes No Are you a U.S. citizen or approved to work in the United States? Yes No What document can you provide as proof of citizenship or legal status? Do you have any condition which would require job accommodations? Yes No

Job Skills/Qualifications

If yes, please describe accommodations required below.

Please list below the skills and qualifications you possess for the position for which you are applying:

(Note: the Scottish Pig com	plies with the ADA and consid	lers reasonable accom	modation measures that
may be necessary for eligib	le applicants/employees to pe	erform essential functio	ns.)
Education and Training			
High School			
Name	Location (City, State)	Year Graduated	Degree Earned
			Ŭ
College/University			
Name	Location (City, State)	Year Graduated	Degree Earned
Vocational School/Specia			
Name	Location (City, State)	Year Graduated_	Degree Earned
Are you a member of the A What branch of the military What was your military ran How many years did you s What military skills do you	y did you enlist? nk when discharged?	set for this position?	
Previous Employment Employer Name: Job Title: Supervisor Name: Employer Address: City, State and Zip Code: Employer Telephone: Dates Employed: Reason for leaving: Employer Name: Job Title: Supervisor Name: Employer Address:			

Employer Telephone:	
Dates Employed:	
Reason for leaving:	
Employer Name:	
Job Title:	
Supervisor Name:	
Employer Address:	
City, State and Zip Code:	
Employer Telephone:	
Dates Employed:	
Reason for leaving:	
AT-WILL EMPLOYMENT	
•	the the Scottish Pig is referred to as "employment at will." This
	terminated at any time for any reason, with or without cause, with
	Scottish Pig. No representative of the Scottish Pig has authority to
	the foregoing "employment at will" relationship. You understand
	and that you acknowledge that no oral or written statements or
	byment can alter your at-will employment status, except for a written
Company's President.	er our Executive Vice-President/Chief Operations Officer or the
Company's Fresident.	
Applicant Signature:	Dated:
Applicant Signature.	Dateu.